



STATE OF HAWAII
Incentive & Service Awards Program
TEAM OF THE YEAR
NOMINATION FORM

Fiscal Year
[Click here](#)

NAME OF TEAM:

Team Members (Names/Positions/Divisions/Phone Nos.):

Department:
[Click here for list](#)

Island:
[Click here](#)

Nominator's Name/Title:

Nominator's Phone No.:

Team Assignment/Objective:

REASONS FOR NOMINATION

(Describe the specific achievement in detail, including: (1) the way and degree to which the team demonstrated exemplary initiative and leadership, outstanding work performance, creativity and innovation in achieving work efficiency or generating revenues or cost savings, and/or significant contribution towards the attainment of program objectives; and (2) benefits or results realized.)